

March 23, 2001

Ms. Grisell V. Diaz-Cotto
Emergency and Remedial Response Division
United States Environmental Protection Agency
Region III
290 Broadway, 19th Floor
New York, NY 10007-1866

Re: February 2001 Discharge Monitoring Report
Leachate Treatment Plant, Operable Unit 1
Kin-Buc Landfill Superfund Site

Dear Ms. Diaz-Cotto:

The February 2001 Discharge Monitoring Report (DMR) for the Leachate Treatment Plant of Operable Unit 1, Kin-Buc Landfill Superfund Site, prepared by U.S. Filter Operating Services is attached. We will provide copies of the DMR to Ian Curtis and Susan Dietrick at the NJDEP.

Should you have any questions concerning the DMR or other site items, please contact me or Glenn Grieb at the Kin-Buc site.

Very truly yours,
USFilter Operating Services
On behalf of SCA Services, Inc.,



Dennis J. Duryea, P.E.
Area Manager

Enclosure

cc: Ian Curtis - NJDEP
Susan Dietrick - NJDEP
Stephen Joyce - SCA
Carl Januszkiewicz - Waste Management
Glenn Grieb - USFOS, Kin-Buc
File



NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER QUALITY

MONITORING REPORT - TRANSMITTAL SHEET

NJPDDES NO.

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*NJ Permit Equivalent

REPORTING PERIOD

M	o.	Y	r.	M	o.	Y	r.
0	2	0	1	0	2	0	1

PERMITTEE:	Name:	SCA Services, Inc.
	Address:	383 Meadow Road
		Edison, New Jersey 08817
FACILITY:	Name:	Kin-Buc Landfill
	Address:	383 Meadow Road
		Edison, New Jersey 08817
	Telephone:	732-572-4743

FORMS ATTACHED (Indicate Quantity of Each)

Operating Exceptions

SLUDGE REPORT-SANITARY
☐ T-VWX-007 ☐ T-VWX-008 ☐ T-VWX-009
☐ EPA Form 3320-1

	YES	NO
DYE TESTING	<input type="checkbox"/>	<input checked="" type="checkbox"/>

SLUDGE REPORT-INDUSTRIAL
☐ T-VWX-010A ☐ T-VWX-010B

TEMPORARY BYPASSING	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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WASTEWATER REPORTS
☐ T-VWX-011 ☐ T-VWX-012 ☐ T-VWX-013

DISINFECTION INTERRUPTION	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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GROUNDWATER REPORTS
☐ T-VWX-015(A,B) ☐ T-VWX-016 ☐ T-VWX-017
☐ ELECTRONIC SUBMISSION

MONITORING MALFUNCTIONS	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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UNITS OF OPERATION	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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OTHER	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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NPDES DISCHARGE MONITORING
☐ EPA Form 3320-1

(Detail any "Yes" on reverse side in appropriate space.)

NOTE: The "Hours Attended at Plant" on the reverse of this sheet must also be completed.

AUTHENTICATION I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

LICENSED OPERATOR

PRINCIPAL EXECUTIVE OFFICER OR
DULY AUTHORIZED REPRESENTATIVE

Name (Printed)	Dennis J. Duryea
Grade & Registry No.	N-4 ; 0014528
Signature	<i>Dennis J. Duryea</i>

Name (Printed)	Dennis J. Duryea
Title (Printed)	Plant Operations Manager
Signature	<i>Dennis J. Duryea</i>

Date March 23, 2001

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

MONTH	0	2	YEAR	0	1
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Others

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
8	8	0	0	8	8	4	12	8	8	0	8	8	13	13	10
8	16	0	18	16	16	16	16	16	0	21	8	16	8	12	5
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
8	8	10	8	7	12	8	0	0	8	8	8				
24	4	16	16	16	16	16	4	5	16	16	16				

PERMITTEE NAME/ADDRESS
NAME
ADDRESS

SCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817

FACILITY
LOCATION
ATTN:

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT			001			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	01	01		02	28	01

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.016574	0.027300	MGD	*****	*****	*****	***		continuous	flow meter
	PERMIT REQUIREMENT	REPORT	ONLY		*****	*****	*****			continuous	flow meter
pH	SAMPLE MEASUREMENT			***	6.92		7.33	S.U.	0	1/week	grab
	PERMIT REQUIREMENT	*****	*****		6.0	*****	9.0			weekly	grab
PETROLEUM HYDROCARBONS	SAMPLE MEASUREMENT			***	*****	<0.50	<0.50	mg/l	0	2/month	grab
	PERMIT REQUIREMENT	*****	*****		*****	10	15			2/month	grab
COD	SAMPLE MEASUREMENT	14.6	17.97	kg/day	*****	140	169	mg/l		2/month	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT	ONLY			2/month	comp.
BOD - 5	SAMPLE MEASUREMENT			***		<2.00	<2.00	mg/l	1	2/month	calc.
	PERMIT REQUIREMENT	*****	*****		*****	56	220			2/month	calc.
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT	0.0999	0.1111	kg/day	*****	1.1	1.2	mg/l	0	1/week	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	30	45(1)			weekly	comp.
DISSOLVED OXYGEN	SAMPLE MEASUREMENT			***	9.0		12.8	mg/l	0	1/week	grab
	PERMIT REQUIREMENT	*****	*****		INSTANT	*****	*****			weekly	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)					TELEPHONE		DATE		
Dennis J. Duryea, P.E. Area Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					732 572-4743		01 / 03 / 23		
TYPED OR PRINTED							AREA CODE NUMBER		YEAR MO DAY		
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS (REFERENCE ALL ATTACHMENTS HERE)											

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KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT			001			
PERMIT NUMBER			DISCHARGE NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
02	01	01		02	28	01

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
BENZENE	SAMPLE MEASUREMENT	<0.00020	<0.00023	kg/day	*****	<2.3	<2.3	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.009	0.02		*****	57	134			2/month	grab		
CHLOROBENZENE	SAMPLE MEASUREMENT	<0.00025	<0.00028	kg/day	*****	<2.8	<2.8	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.022	0.058		*****	142	380			2/month	grab		
1,1 DICHLOROETHENE	SAMPLE MEASUREMENT	<0.00025	<0.00028	kg/day	*****	<2.8	<2.8	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.003	0.009		*****	22	59			2/month	grab		
ETHYLBENZENE	SAMPLE MEASUREMENT	<0.00025	<0.00028	kg/day	*****	<2.8	<2.8	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.022	0.058		*****	142	380			2/month	grab		
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT	<0.00028	<0.00031	kg/day	*****	<3.1	<3.1	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.008	0.025		*****	52	164			2/month	grab		
TOLUENE	SAMPLE MEASUREMENT	<0.00040	<0.00044	kg/day	*****	<4.4	<4.4	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.004	0.011		*****	28	74			2/month	grab		
1,2-TRANSDICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.00022	<0.00025	kg/day	*****	<2.5	<2.5	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.004	0.009		*****	25	60			2/month	grab		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<small>I certify under penalty of law that I have personally examined and am familiar with the information submitted herein and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years).</small>				TELEPHONE		DATE					
Dennis J. Duryea, P.E. Area Manager						572-4743		01 03 23					
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR MO DAY			
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE		NUMBER		YEAR MO DAY	

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

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PERMIT NUMBER			DISCHARGE NUMBER		
MONITORING PERIOD					
YEAR	MO	DAY	TO		
02	01	01	02 28 01		

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
TRICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.00022	<0.00025	kg/day	*****	<2.4	<2.4	ug/L	0	2/month	grab	
	PERMIT REQUIREMENT	0.004	0.010		*****	26	69			2/month	grab	
VINYL CHLORIDE	SAMPLE MEASUREMENT	<0.00040	<0.00043	kg/day	*****	<4.3	<4.3	ug/L	0	1/week	grab	
	PERMIT REQUIREMENT	0.008	0.016		*****	52.8	106			weekly	grab	
ACENAPHTHYLENE	SAMPLE MEASUREMENT	<0.00008	<0.00009	kg/day	*****	<0.94	<0.94	ug/L	0	1/month	grab	
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab	
BENZO(A)ANTHRACENE	SAMPLE MEASUREMENT	<0.00008	<0.00009	kg/day	*****	<0.89	<0.89	ug/L	0	1/month	grab	
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab	
BENZO(A)PYRENE	SAMPLE MEASUREMENT	<0.000043	<0.000048	kg/day	*****	<0.48	<0.48	ug/L	0	1/month	grab	
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab	
BENZO(ghi)PERYLENE	SAMPLE MEASUREMENT	<0.000049	<0.000054	kg/day	*****	<0.54	<0.54	ug/L	0	1/month	grab	
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab	
BENZO(k)FLUORANTHENE	SAMPLE MEASUREMENT	<0.000083	<0.000092	kg/day	*****	<0.92	<0.92	ug/L	0	1/month	grab	
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Dennis J. Duryea, P.E. Area Manager							<i>Dennis J. Duryea</i>		732 572-4743		01 03 23	
TYPED OR PRINTED							AREA CODE		NUMBER		YEAR MO DAY	
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)										

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT


NJ PERMIT EQUIVALENT			001			
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YEAR	MO	DAY	TO	YEAR	MO	DAY
02	01	01		02	28	01

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE						
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS									
IDENO(1,2,3cd) PYRENE	SAMPLE MEASUREMENT	<0.000053	<0.000059	kg/day	*****	<0.59	<0.59	ug/L	0	1/month	grab						
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab						
PHENANTHRENE	SAMPLE MEASUREMENT	<0.000052	<0.000057	kg/day	*****	<0.57	<0.57	ug/L	0	1/week	grab						
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	5.4(2)			weekly	grab						
ALDRIN	SAMPLE MEASUREMENT	<0.0000045	<0.0000050	kg/day	*****	<0.050	<0.050	ug/L	0	1/month	grab						
	PERMIT REQUIREMENT	0.000133	0.00026		*****	0.0875	0.176			monthly	grab						
4,4-DDT	SAMPLE MEASUREMENT	<0.0000091	<0.0000100	kg/day	*****	<0.1	<0.1	ug/L	0	1/week	grab						
	PERMIT REQUIREMENT	0.0000578	0.000146		*****	0.38	0.765			weekly	grab						
PCB-1242	SAMPLE MEASUREMENT	<0.000027	<0.000030	kg/day	*****	<0.3	<0.3	ug/L	0	1/week	grab						
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab						
PCB-1248	SAMPLE MEASUREMENT	<0.000027	<0.000030	kg/day	*****	<0.3	<0.3	ug/L	0	1/week	grab						
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab						
PCB-1254	SAMPLE MEASUREMENT	<0.000027	<0.000030	kg/day	*****	<0.3	<0.3	ug/L	0	1/week	grab						
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab						
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)					TELEPHONE		DATE								
Dennis J. Duryea, P.E. Area Manager							732 572-4743		01 03 23								
TYPED OR PRINTED							AREA CODE	NUMBER	YEAR	MO	DAY						
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS		(REFERENCE ALL ATTACHMENTS HERE)					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT										

PERMITTEE NAME/ADDRESS

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ADDRESSSCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817FACILITY
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ATTN:KIN-BUC LANDFILL
EDISON, NEW JERSEY
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02	01	01		02	28	01

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PCB-1260	SAMPLE MEASUREMENT	<0.000027	<0.000030	kg/day	*****	<0.3	<0.3	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
ARSENIC	SAMPLE MEASUREMENT	<0.00091	<0.00100	kg/day	*****	<10	<10	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.013	0.026		*****	85.8	172			weekly	comp
CADMIUM	SAMPLE MEASUREMENT	<0.00045	<0.00050	kg/day	*****	<5.0	<5.0	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.0073	0.017		*****	48.2	112			weekly	comp
CHROMIUM	SAMPLE MEASUREMENT	<0.00091	<0.00100	kg/day	*****	<10	<10	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.030	0.060		*****	198	396			weekly	comp
COPPER	SAMPLE MEASUREMENT	<0.00018	<0.00020	kg/day	*****	<2	<2	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp
LEAD	SAMPLE MEASUREMENT	<0.00045	<0.00050	kg/day	*****	<5	<5	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp
NICKEL	SAMPLE MEASUREMENT	<0.0036	<0.0040	kg/day	*****	<40	<40	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.140	0.281		*****	924	1850			weekly	comp
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)					TELEPHONE		DATE		
Dennis J. Duryea, P.E. Area Manager		 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					732	572-4743	01	03	23
TYPED OR PRINTED							AREA CODE	NUMBER	YEAR	MO	DAY
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS (REFERENCE ALL ATTACHMENTS HERE)											

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE						
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS									
ZINC	SAMPLE MEASUREMENT	0.0035	0.0073	kg/day	*****	38.75	76.0	ug/L	0	1/week	comp						
	PERMIT REQUIREMENT	0.177	0.356		*****	1170	2350			weekly	comp						
CYANIDE	SAMPLE MEASUREMENT	<0.0009	<0.0010	kg/day	*****	<10	<10	ug/L	0	1/week	comp						
	PERMIT REQUIREMENT	0.002	0.004		*****	13.2	26.4			weekly	comp						
ALUMINUM	SAMPLE MEASUREMENT	<0.0091	<0.0100	kg/day	*****	<100	<100	ug/L	0	1/week	comp						
	PERMIT REQUIREMENT	1.40	2.81		*****	9240	18500			weekly	comp						
IRON	SAMPLE MEASUREMENT	<0.0091	<0.0100	kg/day	*****	<100	<100	ug/L	0	1/week	comp						
	PERMIT REQUIREMENT	80.6	162		*****	532000	1070000			weekly	comp						
ACUTE TOXICITY, (LC50)	SAMPLE MEASUREMENT			***		*****	*****	%									
	PERMIT REQUIREMENT	*****	*****		50(3)	*****	*****			see permit	equivalent						
Ammonia (as N)	SAMPLE MEASUREMENT			***	*****	0.88945	2.27	mg/l		2/Month	comp						
	PERMIT REQUIREMENT				*****	4.9	10			2/month	comp						
	SAMPLE MEASUREMENT			***	*****	*****	*****			*****	*****						
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****			*****	*****						
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TYPED OR PRINTED							732	572-4743	01 03 23								
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